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## BIB DATA SHEET

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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/JP03/11847 09/17/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*\* SMALL ENTITY \*\***

01/30/2007

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance  Initials	JAPAN	0	8

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**TITLE**

Medicinal composition

<b>FILING FEE RECEIVED</b> 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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